



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 9279

<b>SERIAL NUMBER</b> 09/772,256	<b>FILING DATE</b> 01/29/2001 <b>RULE</b>	<b>CLASS</b> 380	<b>GROUP ART UNIT</b> 2131	<b>ATTORNEY DOCKET NO.</b> 1909.2.75A
<b>APPLICANTS</b> Hilarie K. Orman, Woodland Hills, UT;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/189,829 03/16/2000 <i>DK</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>DK</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/03/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>AW</i> Examiner's Signature <i>AW</i> Initials		<b>STATE OR COUNTRY</b> UT	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 37
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> John W. L. Ogilvie COMPUTER LAW++ 1211 East Yale Avenue Salt Lake City ,UT 84105				
<b>TITLE</b> Security context sharing				
<b>FILING FEE RECEIVED</b> 1096	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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<b>APPLICANTS</b> Hilarie K. Orman, Woodland Hills, UT;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/189,829 03/16/2000 <i>AW</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>AW</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/03/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>AW</i> Acknowledged Examiner's Signature Initials	<b>STATE OR COUNTRY</b> UT	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 21186				
<b>TITLE</b> Security context sharing				
<b>FILING FEE RECEIVED</b> 1096	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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